STATE OF WISCONSIN

Division of Children and Family Services CFS-2366 (06/2005)

GUARDIAN FAMILY ASSESSMENT

| Туре | Date (mm/dd/yyyy) |
|-----------------|-------------------|
| Name – Provider | Provider Number |
| Name - Worker | |

Division of Children and Family Services CFS-2366 (06/2005)

| POTENTIAL GUARDIAN | | | | | |
|--|--------------|-----------------------------|------------------------|------------------------|--|
| Potential Guardian No. 1 | | - | | - | |
| Name | | Birthd | Birthdate (mm/dd/yyyy) | | |
| | | | | | |
| Race | | Religion | | | |
| Occupation | | | Talan | hana Niverkan VV | |
| Occupation | | | l elep | hone Number – W | ork |
| Detential Cuardian No. 2 | | | | | |
| Potential Guardian No. 2 Name | | | Birthd | ate (mm/dd/yyyy) | |
| | | | | (| |
| Race | | Religion | | | |
| | | - | | | |
| Occupation | | | Telep | hone Number – W | ork |
| | | | | | |
| Date – Marriage (mm/dd/yyyy) | Prior Marria | ~ | | | |
| | ☐ Yes ☐ | No Potential Guardian 1 | Yes |] No Potential Gເ | ıardian 2 |
| Address - Home (Street, City, State, Zip Code) | | | Telep | hone Number – Ho | ome |
| | | | | | |
| Directions to Home | | | | | |
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| | | | | | |
| | | | | | |
| HOUSEHOLD MEMBERS | | | | | |
| Name | | Status (birth child, foste | | Birthdate | Gender |
| Name | | adult relative, adult board | der, etc.) | (mm/dd/yyyy) | _ |
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| | | | | | □ M □ F □ M □ F □ M □ F □ M □ F □ M □ F |
| OTHER CHILDREN (OUT-OF-HOME) | | | | | □ M □ F □ M □ F □ M □ F □ M □ F □ M □ F □ M □ F |
| OTHER CHILDREN (OUT-OF-HOME) Name | | Status (step children, en | nancipated, | Birthdate (mm/dd/nnn) | □ M □ F □ M □ F □ M □ F □ M □ F □ M □ F □ M □ F |
| | | Status (step children, en | nancipated, | Birthdate (mm/dd/yyyy) | M |
| | | | nancipated, | | M |
| | | | nancipated, | | □ M □ F □ M □ F □ M □ F □ M □ F □ M □ F □ M □ F Gender □ M □ F □ M □ F □ M □ F □ M □ F |
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| | | | nancipated, | | □ M □ F □ M □ F □ M □ F □ M □ F □ M □ F □ M □ F Gender □ M □ F □ M □ F □ M □ F □ M □ F |
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| ADDITIONAL REQUIRED HOME STUDY ASSESSMENT INFORMATION | | | | | |
|---|--|---|---------------------------------------|--|--|
| References Contacted | | 1 | Lottor or Morles | | |
| Name | | Relationships / Status | Letter or Worker Dictation on File | | |
| | | | Yes No | | |
| | | | Yes No | | |
| | | | Yes No | | |
| | | | Yes No | | |
| | | | Yes No | | |
| | | | Yes No | | |
| | | | Yes No | | |
| | | | ☐ Yes ☐ No | | |
| | | | ☐ Yes ☐ No | | |
| | | | ☐ Yes ☐ No | | |
| Other Record Checks | | | | | |
| | sconsin Department of Justice Criminal Rec lings are on file in study record. | cord Check was completed on each required member | of household and | | |
| | | completed on each required member of household and | I findings are on file | | |
| | tudy record. | | | | |
| Red | cord contains information from prior adoptic | on or foster home studies or other public records include | ling: | | |
| | | | | | |
| | | | | | |
| Listing of Contact Date | es During Assessment | | | | |
| | ssions, individual and joint interviews, home | e visits, collateral contacts | | | |
| Date (mm/dd/yyyy) | Name – Person(s) Contacted | | | | |
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PARENT FORCE

1. History Element

What is the potential guardian's childhood and adult history? Consider the individual's cultural context in your description. Specific areas include: marriages, divorces; births; employment; education; physical / mental health; childbearing or infertility; arrests or legal encounters; relationships (including other races / cultures); number and type of foster placements (CPS, Juvenile Justice, other); foster placement success or disruption; other information.

Potential Guardian No. 1

Potential Guardian No. 2

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PARENT FORCE (continued)

2. **Adult General Functioning Element**

How does the potential guardian function with respect to daily management and general adaptation? Specific areas include: problem solving capacity / history, response / reaction to stress, ability to communicate, styles of communication, cognitive functioning; ability to make judgments / decisions and capacity / history to follow through; use of defense mechanisms; levels of self-esteem; awareness of own capabilities and limitations; ability to control emotions; adaptation to infertility (if appropriate); levels of impulse control; expression of emotions / feelings / general temperament; attitudes toward people of similar / different races, cultures, religions; attitudes toward and response to sexual contact between children (if appropriate); homophobia; substance use issues; mental health issues.

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Potential Guardian No. 2

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PARENT FORCE (continued)

Parenting - General Parenting and Discipline Element

What are the overall, typical, pervasive parenting practice, used by the potential guardian. What are the disciplinary approaches used by the potential guardian, including the typical context? Specific areas include: parenting practices in the family in terms of sensitivity, concern, provision of basics; comfort with guardian role; ability to parent trans-racial / trans-cultural child if appropriate; school attendance of all children; parent's school involvement; bonding; dress, hygiene, general appearance of children; parent's ability to meet own children's emotional needs (time alone with parent, etc.); any reports of child maltreatment and investigations; other information. View of the role of discipline (teaching, punishment, safety, etc.); parenting practices in the family in terms of expectations, frustrations, supervision, and disciplinary approaches. Specifically include discipline used with foster children, own children, grandchildren, daycare, etc.; other information.

Potential Guardian No. 1

Potential Guardian No. 2

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CHILD FORCE

1. Child Functioning Element

How does the child(ren) function on a daily basis? **Enter "N/A" if no child exists.** Specific areas include: general temperament, expressions of emotions / feelings, typical behaviors, presence and level of peer relationships, school performance, known mental health disorders including substance abuse (organic / inorganic); issues of independence / dependence; issues related to racial / cultural identity; other information.

| Name - Child | Age | Child Functioning |
|--------------|-----|-------------------|
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OTHER COMMENTS

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FAMILY FORCE

Family Functioning Element

How is the family structured? Who is the primary decision maker? How does the family function, communicate and interact? Consider the family's cultural context as you describe family functioning. Specific areas include: family structure and flexibility; clarity of roles and boundaries (including roles of / with foster children), who is in charge, how family decisions are reached, the level and type of communication used, the presence and use of affection, marital issues, unresolved infertility issues of couple (if appropriate), presence / absence of family violence, open / closed to transracial / transcultural / religious experiences; general feelings / climate within the family; if family has been providing foster care at the time of the adoption study consider effects of fostering on family relationships, including marital relationship; other information.

2. **Family Support Network Element**

What is the quality of supportive relationships (formal and informal) outside the home? Consider the family's cultural context as you describe their support network. Specific areas include: nature of extended family support; support of nonrelated persons (friends, confidantes); involvement / support of organizations, clubs, churches, agencies; involvement / support of neighbors, business and social associates; other information.

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FAMILY FORCE (continued)

Demographic Element

What are the demographics of the family? Consider the family's cultural context as you describe demographics. Specific areas include: economic resources; employment; home (additions / remodeling with square footage); neighborhood and community (include racial / cultural / religious integration); health problems; financial dependence on foster care; stresses related to demographics and how handled (e.g., medical, bankruptcy, family moves, household members leaving); other information.

BIRTH FAMILY FORCE

Viewpoint of Birth Parents Element

What is the general attitude toward the birth family? How does the potential guardian view maltreatment, parents who maltreat their children, parents who place their children in foster care, and parents whose children are placed by a court in foster care? How do the birth parents view children placed in foster care? Any differences in view based on type / age / race; culture / religion of the child? Training completed or needed concerning the parent's viewpoint of birth parents. What are the feelings toward and treatment of foster children (general, and specific to their foster children; consider presentation of foster children to community (sensitivity, advocacy); other information.

Potential Guardian No. 1

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| RIRTH | FΔMII | Y FORCE | (continued) |
|-------|-------|---------|-------------|
| | | | |

1. Viewpoint of Birth Parents Element (continued)

Potential Guardian No. 2

PROSPECTIVE GUARDIAN FAMILY FORCE

1. Preparation Element

How prepared is the family to become a guardianship family? How able is the family to provide guardianship children with racial, cultural, and religious experiences? Include issues related to visitation with birth relatives and reunifications as appropriate. Specific areas include: family's own children's current view of guardianship, including jealousy issues; parent's specific capabilities as related to being guardianship parent(s); training completed or needed concerning impact of guardianship; other information.

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2. Motivation / Commitment Element

What is the nature and level of motivation and commitment demonstrated by the potential guardianship family? Include infertility issues as appropriate. Specific areas include: basis / reasons for motivation / commitment (e.g., status, financial, emotional, guardianship, own needs, service to community, etc.); other information.

INTERVENTION FORCE

1. Family Response / Resource Element

How capable is the potential guardian(s) to use agency involvement and to seek help on their own? Include willingness of family to seek cross-cultural models and experiences. What are the resources external to the potential guardianship family which support the guardianship? Specific areas include: willingness to pursue outside resources, communication with agency staff; relationship with agency staff (includes willingness to receive consultation / advice); relationship with other professionals; ability to share information; ability to keep information confidential; ability to keep schedules and appointments; willingness to be involved with birth family (as appropriate); resourcefulness in pursuit of services; willingness to provide transportation; participation in school and outside activities.

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| CON | CLUSION | IS | | |
|------|------------|-----------|--|---|
| 1. | ☐ Yes [| No | Is there concern for maltreatment of likelihood of maltreatment in the currently placed? If "Yes", identify decisions and actions concerning | |
| | | | | |
| 2. | ☐ Yes ☐ | No | Is there a concern for disruption or likelihood for disruption in the pot placed? | ential guardianship home if child is currently |
| | ☐ Yes [| No | If this potential guardianship family is currently providing foster care, strengthen skills / abilities to remain a foster family? | does the family require agency support to |
| | ☐ Yes [| No | If this potential guardianship family is not providing foster care, are the prevent disruption and strengthen the family? | nere decisions and actions that can be taken to |
| | | | y of the above questions is "Yes", complete the Action / Support Plan e family's skills / abilities. | designed to remedy the disruptive condition(s) |
| 3. | Based upo | on all ma | terials, interviews, and use of the Guardian Family Assessment (GFA | s) system, the conclusion of the is as follows. Provide a general summary |
| | the family | to paren | t children who may be or are now placed in the home. | |
| SIGN | IATURES | | | |
| | | | | |
| | | | SIGNATURE – Worker | Date Signed |
| | | | SIGNATURE – Supervisor | Date Signed |